POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION O.I.P.E. CLASSIFIER	.//		112800
FORMALITY REVIEW	C.H	71652	1/18/01
RESPONSE FORMALITY REVIEW		71632	2/2/1/01
			, ,

## INDEX OF CLAIMS

🗸 Rejected 🐪	N Non-elected
= Allowed	IInterference
=Allowed	A Appeal
- (Through numeral) Canceled	Oblasted
÷ Restricted	O Objected

Claim Date	Claim Date	Claim Date
Final Original Conditional	Original	Onginal
4 1).	51	101
	52	102
3 1	53	103
4	54	104
	55	105
3 6	56	106
7	57	107
8	58	108
9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	59	110
10	60 61	111
	62	112
12 13)	63	113
114	64	114
<b>415</b>	65	115
16	66	116
17 V	67	117
18	68	118
19	69	119
20	70	120
21	71	121
22	72	123
23	73	124
24	75	125
25 26	76	126
27	777	127
28	78	128
29	79	129
30	80	130
31	81	131
32	82	132
33	83	133
34	85	135
35 36	86	136
37	87	137
38	88	138
39	89	139
40	90	140
41	91	141
42	92	142
43	93	143
44	94	144
45	95	145
46	96	146
47	97	147
48	98	148
49	99	149
50	100	

If more than 150 claims or 10 actions staple additional sheet here

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